

PART B - FEE(S) TRANSMITTAL

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01/08/2010

ATTN: MCMR-JA (Ms. Elizabeth Arwine- PATENTARY)
 U. S. Army Medical Research and Materiel Command
 504 Scott Street
 Fort Detrick, MD 21702-5012

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 I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Jill Lane Caldwell (Depositor's name)
 Jill Lane Caldwell (Signature)
 March 30, 2010 (Date)

03/31/2010 CCHAU2 00000025 210380 10066506

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TITLE OF INVENTION: CHIMERIC FILOVIRUS GLYCOPROTEIN

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	04/08/2010

EXAMINER	AFT UNIT	CLASS-SUBCLASS
PARKIN, JEFFREY S	1648	424-202100

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Elizabeth Arwine

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

United States of America as Represented
 by the Secretary of the Army

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

U.S.A.

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☐ Corporation or other private group entity ☒ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee
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5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature Elizabeth Arwine

Date 30 Mar 2010

Typed or printed name ELIZABETH ARWINE

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